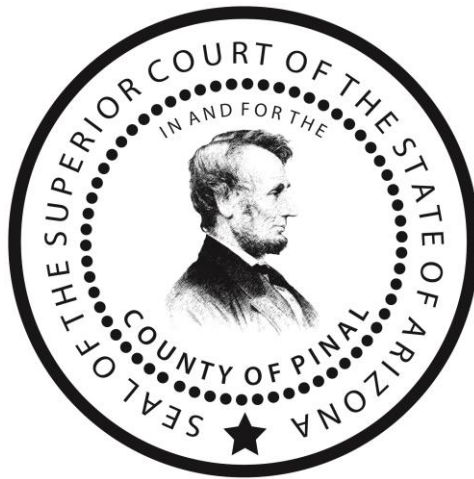


FOREIGN JUDGMENT



PINAL COUNTY

INSTRUCTIONS AND FORMS

Provided as a Public Service by
REBECCA PADILLA
Clerk of the Superior Court

INSTRUCTIONS

“Filing a Foreign Judgment”

**In Order to File a Foreign Judgment in The Superior Court of Arizona,
The Following is Required:**

1. All forms must be completed with **BLACK INK ONLY**.
2. A certified or authenticated copy of the filed-in judgment from the foreign court in which it was rendered.
3. An Affidavit Substantiating a Foreign Judgment, setting forth the name and last known address for both the Petitioner and Respondent.
4. A Notice of Filing Foreign Judgment.
5. A Family Court Cover Sheet.
6. When Filing a Foreign Judgment, fees will apply and are due at the time of filing (for a list of current fees visit www.coscpinalcountyaz.gov/fees.html). Payment may be made by Cash, Money Order, Visa or MasterCard, Debit or Credit or a Personal In-State Check made payable to the **“Clerk of Superior Court.”**

If you cannot pay these fees and if you qualify, you may request the fee(s) be deferred or waived. The Clerk of the Superior Court has the necessary forms to ask for a deferral or waiver.

NOTE: With the Application for Deferral there is a fee and you must provide proof of income (copy of your last 2 most recent paystubs).

PROCEDURES

How to File a Foreign Judgment with the Court

STEP 1: Complete the “Family Court Coversheet.”
(Do not copy this document)

Make 2 Copies of the following documents after you have filled them out:

- “Affidavit of Filing Foreign Judgment”
- “Notice of Filing Foreign Judgment”

STEP 2: Separate your documents into three (3) sets:

<u>SET 1 - ORIGINALS FOR CLERK OF COURT:</u>	
<ul style="list-style-type: none">• “Family Court Cover Sheet”• “Affidavit of Filing Foreign Judgment”• “Notice of Filing Foreign Judgment”	
<u>SET 2 - COPIES FOR THE OTHER PARTY:</u>	<u>SET 3 – COPIES FOR YOU:</u>
<ul style="list-style-type: none">• “Affidavit of Filing Foreign Judgment”• “Notice of Filing Foreign Judgment”	<ul style="list-style-type: none">• “Affidavit of Filing Foreign Judgment”• “Notice of Filing Foreign Judgment”

STEP 3: File the Papers with The Clerk Of The Superior Court:

The Clerk’s Office is open from 8 am – 5 pm, Monday-Friday. **You should arrive at the Clerk’s Office at least two hours before it closes.** You may file your court papers at the following locations:

Visit our website for our office locations or feel free to give us a call.

Contact Information for all Offices

Toll Free: 888.431.1311 • Local: 520.509.3555 or 311 • Fax: 520.866.5320

www.coscpinalcountyaz.gov/office.html

FEES: There is a filing fee and there may be other charges associated with this case. Inquire with the Clerk’s office regarding the filing fee amount or go online to www.coscpinalcountyaz.gov/fees.html for a list of current fees.

If you cannot pay these fees, you may request the fee(s) be deferred or waived if you qualify. The Clerk of the Superior Court has the necessary forms to ask for a deferral or waiver.

NOTE: With the Application for Deferral there is a fee and you must provide proof of income (copy of your last 2 most recent paystubs).

PAPERS: Hand all three **(3)** sets of your court papers to the Clerk along with the filing fee. The Clerk's office accepts Cash, Money Order, Visa or MasterCard, Debit or Credit or a personal in-state Check **made payable to the "Clerk of Superior Court."**

MAKE SURE YOU GET THE FOLLOWING BACK FROM THE CLERK:

- Your Set of Copies – Conformed stamped
- The Other Party's Set of Copies – Conformed stamped

STEP 4: Read the packet called **"Service of Court Papers"** that applies to your situation. This will explain how to serve the other party. Remember to file your Affidavit, Waiver or Acceptance of Service as soon as the other Party is served.

Arizona Superior Court, Pinal County
Family Court Cover Sheet

CASE NUMBER <u> S1100DO2 </u> ATLAS NUMBER(S) _____	Judge _____
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PETITIONER'S NAME AND ADDRESS	RESPONDENT'S NAME AND ADDRESS
Name: Address: City/State/Zip: Phone Number: Email Address: DOB:	Name: Address: City/State/Zip: Phone Number: Email Address: DOB:

PETITIONER'S ATTORNEY	EMERGENCY ORDER SOUGHT
Name/State Bar #: Address: City/State/Zip: Phone Number:	<input type="checkbox"/> Order of Protection <input type="checkbox"/> Temporary Order <input type="checkbox"/> Other _____ (Specify)

Do you or the other party need an interpreter? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, what language: _____	FEES: <input type="checkbox"/> PAID <input type="checkbox"/> NOT PAID - REASON <input type="checkbox"/> Political Subdivision/Government Agency <input type="checkbox"/> Deferred <input type="checkbox"/> Waived
---	---

ACTION REQUESTED: Check Only One Box

DISSOLUTION (Divorce)

- With Children
- Without Children

- Legal Separation
- Paternity/Maternity
- Annulment
- Legal Decision-Making

- Order of Protection
- Foreign Judgment
- Domesticated Decree
- Foreign Judgment for Legal Decision-Making
- Establish Support
- Habeas Corpus
- Visitation
- Emergency Order of Protection
- Other _____

(Specify)

I receive or have received public assistance which may include AFDC, TANF, or AHCCS for my child(ren) or me.

- Yes No

I have a case with the Division of Child Support Enforcement.

- Yes No

If yes, list the case number(s)

Do you currently have ANY other Pinal County Superior Court cases?

- Yes No

If yes, list the case number(s)

Have you ever had ANY other Pinal County Superior Court cases?

- Yes No

If yes, list the case number(s)

**PETITIONER'S DECLARATION OF INFORMATION FOR
CONCILIATION COURT**

The wife is pregnant: Yes No

The respondent is being served by publication: Yes No

Please enter the number of children under the age of 18 of either or both parties who are in Legal

Decision-Making of either or both parties: _____

**NAMES OF MINOR CHILDREN &
DATE OF BIRTH:**

**NAMES OF MINOR CHILDREN &
DATE OF BIRTH:**

There is an agreement as to the parenting arrangements of the minor children:

Yes No

To the best of my knowledge, all information is true and correct.

Attorney / Pro Per Signature *(If no attorney, your signature is required)*

NOTICE

Effective September 8, 1992 and pursuant to Superior Court (Pinal County), Administrative Order No. 92-15, the Superior Court requires that a "Cover Sheet", which categorizes the cause of action, accompany any new action filed with the Superior Court in Pinal County. **PLEASE DO NOT INCLUDE THIS FORM WITH CASES THAT HAVE ALREADY BEEN FILED.** This form can only be processed **at the time of filing** New Complaints and Petitions.

Revised 6/22/09

Name of Person Filing: _____
Street Address: _____
City, State, Zip Code: _____
Telephone Number: _____
Email Address: _____
ATLAS Number (if applicable) _____
 Representing Self (No Attorney) or Represented by Attorney
If Attorney, Bar Number: _____

**SUPERIOR COURT OF ARIZONA
PINAL COUNTY**

_____ CASE NUMBER: S1100DO2
Name of Petitioner

**AFFIDAVIT OF FILING FOREIGN
JUDGMENT**

_____ HONORABLE: _____
Name of Respondent

I AFFIRM THAT I AM OVER THE AGE OF 18 AND OTHERWISE COMPETENT TO TESTIFY IN A COURT OF LAW OF THE UNITED STATES OR SEVERAL STATES AND MAKE THIS AFFIDAVIT WITHOUT BEING UNDER FRAUD, DURESS OR UNDUE INFLUENCE FROM ANY PERSON AS TO THE FOLLOWING FACTS:

1. Pursuant to A.R.S. §12-1702 et seq., I am filing this affidavit with the Clerk of the Superior Court along with a certified copy of the foreign judgment.

2. The name and last known mailing address of the Petitioner is as follows:

3. The name and last known mailing address of the Respondent is as follows:

4. The name and last known mailing address of the Petitioner's Attorney is as follows:

WITNESSED I have read the foregoing affidavit and know of my own knowledge that the facts stated herein are true and correct as of the date this affidavit was sworn.

Date		Signature	
State of Arizona)		
)		
County of _____)		

Subscribed and sworn (or affirmed) before me this _____ day of _____, 20____
(Day) (Month) (Year)

by _____
(Name of Signer)

(Affix notary seal here) _____
Notary Public (Notary's Signature)

CERTIFICATE OF MAILING / DELIVERY

A copy of the accompanying document(s) was Mailed or Hand Delivered (Check One)

To: _____

Address: _____

Date: _____

By: _____

(Signature of Person Making Mailing or Delivery)

Name of Person Filing: _____
Street Address: _____
City, State, Zip Code: _____
Telephone Number: _____
Email Address: _____
ATLAS Number (if applicable) _____
 Representing Self (No Attorney) or Represented by Attorney
If Attorney, Bar Number: _____

**SUPERIOR COURT OF ARIZONA
PINAL COUNTY**

_____ **CASE NUMBER: S1100DO2**
Name of Petitioner

**NOTICE OF FILING FOREIGN
JUDGMENT**

_____ **HONORABLE:** _____
Name of Respondent

You are hereby notified, pursuant to A.R.S. §12-1703(B), that a (certified and authenticated) copy of foreign judgment described below has been filed in the office of the Clerk of the Superior Court for Pinal County.

COURT IN WHICH JUDGMENT WAS ENTERED: _____
CASE NUMBER: _____
DATE OF JUDGMENT: _____
NAME AND ADDRESS OF INITIATING PARTY'S ATTORNEY (if applicable):

RESPECTFULLY SUBMITTED THIS _____ day of _____ 20 _____

(Initiating Party's Signature)